

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

AUG 11 2005

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6815</u>	2. Fiscal Year Covered From: <u>01/01/2004</u> Through: <u>12/31/2004</u>
3. Name and address of person filing. Name <u>MARLIN B MCCURDY</u> P.O. Box, Bldg., Room No., if any Street <u>6815 N OXFORD LN</u> City <u>SPokane</u> State <u>WA</u> ZIP Code + 4 <u>99208</u>	4. Name, file number, and address of labor organization. Name <u>INT. Brotherhood of Basketmakers</u> Labor Organization File Number <u>242 020840</u> P.O. Box, Building and Room Number, if any Street <u>6404 N Pittsburg</u> City <u>Spokane</u> State <u>WA</u> ZIP Code + 4 <u>99217-7598</u>
5. Position in labor organization. <u>BUS - Mgr Sec - TREAS.</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>WESTERN STATES JOINT Apprenticeship Comm.</u> Trade Name, if any: <u>W.S.J.A.C.</u> P.O. Box, Bldg., Room No., if any <u>P.O. Box 1460</u> Street <u>119 West Main STREET</u> City <u>East Helena,</u> State <u>Montana</u> ZIP Code + 4 <u>59635</u>	7.a. Nature of Interest, Transaction, or Income. <u>ATTENDED a dinner @ STEAM plant restaurant</u> <u>Spokane, Wa. Host during APPRENTICE</u> <u>Competition by Western STATES.</u> <u>7-13-04</u> 7.b. Amount. <u>\$56.00</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct and complete. (See the section on penalties in the instructions.)

Signed Marlin B. McCurdy

On 07-27-2005
Date

509-328-1294
Telephone Number